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CONFIRMATION NO. 1411

|                                    |   |                     |                               |   |
|------------------------------------|---|---------------------|-------------------------------|---|
| <b>SERIAL NUMBER</b><br>10/790,913 | <b>FILING OR 371(c) DATE</b><br>03/02/2004<br><b>RULE</b> | <b>CLASS</b><br>717 | <b>GROUP ART UNIT</b><br>2191 | <b>ATTORNEY DOCKET NO.</b><br>END920040013US1 |
|------------------------------------|---|---------------------|-------------------------------|---|

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\*\* CONTINUING DATA \*\*\*\*\*

None *zw*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None *zw*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/24/2004

|   |  |                               |                             |                           |                                |
|---|--|-------------------------------|-----------------------------|---------------------------|--------------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | <b>STATE OR COUNTRY</b><br>TX | <b>SHEETS DRAWING</b><br>14 | <b>TOTAL CLAIMS</b><br>27 | <b>INDEPENDENT CLAIMS</b><br>3 |
| Verified and Acknowledged                                   | Examiner's Signature <i>zw</i> Initials <i>zw</i>  |                               |                             |                           |                                |

**ADDRESS**

30449

**TITLE**

Portlet template based on a state design pattern

|                                    |   |   |
|------------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>1026 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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